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## \*BIBDATASHEET\*

CONFIRMATION NO. 4126

Bib Data Sheet

|   |   |                                  |   |   |
|---|---|----------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/777,080  | <b>FILING OR 371(c) DATE</b><br>02/13/2004<br><b>RULE</b>   | <b>CLASS</b><br>029              | <b>GROUP ART UNIT</b><br>3729   | <b>ATTORNEY DOCKET NO.</b><br>06753.0547-01 |
| <b>APPLICANTS</b><br>Tatsuya Kato, Shizuoka-ken, JAPAN;<br>Masashi Kando, Shizuoka-ken, JAPAN;  |   |                                  |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a DIV of 10/356,895 02/03/2003   |   |                                  |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN P 2002-029868 02/06/2002<br>JAPAN P2002-029712 02/06/2002   |   |                                  |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 05/07/2004</b>  |   |                                  |   |   |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>7                    |
| <b>INDEPENDENT CLAIMS</b><br>1  |   |                                  |   |   |
| <b>ADDRESS</b><br>22852   |   |                                  |   |   |
| <b>TITLE</b><br>WIRE PROCESSING APPARATUS   |   |                                  |   |   |
| <b>FILING FEE RECEIVED</b><br>770   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |

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